SERFF Tracking Number:
 BNLB-125777935
 State:
 Arkansas

 Filing Company:
 Bankers Life and Casualty Company
 State Tracking Number:
 39946

Company Tracking Number:

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: GR-A06

Project Name/Number: /

Filing at a Glance

Company: Bankers Life and Casualty Company

Product Name: GR-A06 SERFF Tr Num: BNLB-125777935 State: ArkansasLH TOI: MS05I Individual Medicare Supplement - SERFF Status: Closed State Tr Num: 39946

Standard Plans

Sub-TOI: MS05I.001 Plan A Co Tr Num: State Status: Approved-Closed Filing Type: Rate Co Status: Submitted Reviewer(s): Stephanie Fowler

Author: Diana Willis Disposition Date: 09/11/2008
Date Submitted: 08/15/2008 Disposition Status: Approved

Implementation Date Requested: Implementation Date: 01/01/2009

State Filing Description:

General Information

Project Name: Status of Filing in Domicile: Pending

Project Number:

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact: 11.8%

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Filing Status Changed: 09/11/2008

State Status Changed: 09/11/2008 Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

2009 Premium Rates for Standardized Medicare Supplement Policy Forms GR-A06A through GR-A06G, GR-A06FH, GR-A06J through GR-A06L

We are submitting the revised rates to be used beginning in 2009 for forms GR-A06A through GR-A06G, GR-A06FH and GR-A06J through GR-A06L. The forms were approved in your state on September 16, 1996. GR-A06FH was approved on March 9, 2000 and forms GR-A06J through GR-A06L were approved on October 27, 2005.

SERFF Tracking Number: BNLB-125777935 State: Arkansas
Filing Company: Bankers Life and Casualty Company State Tracking Number: 39946

Company Tracking Number:

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: GR-A06

Project Name/Number: /

The forms are guaranteed renewable, fully medically underwritten, Standardized Medicare Supplement plans. The various degrees of benefits provides by each plan are shown in the enclosed materials.

Due to the continued inflation in medical care costs, claim cost trend increases and poorer than anticipated experience, we must increase the rates for certain plans. The amounts and details of our requests are explained in the enclosed memorandum.

These revised rate scales are intended to be effective January 1, 2009 or later, depending on the premium mode option chosen and will apply to in-force as well as new business. With these revised rates the anticipated loss ratio standard of your state for these forms will be met.

Because of the lead-time needed to implement these rates, we'd sincerely appreciate your expedited review for approval of this filing. Please feel free to correspond with us via SERFF, fax to (312) 396-5906 or e-mail d.willis@banklife.com.

Company and Contact

Filing Contact Information

Diana Willis, Actuarial Analyst II d.willis@banklife.com
600 West Chicago Avenue (312) 396-7658 [Phone]
Chicago, IL 60610 (312) 396-5906[FAX]

Filing Company Information

Bankers Life and Casualty Company CoCode: 61263 State of Domicile: Illinois

600 West Chicago Avenue Group Code: 233 Company Type:
Chicago, IL 60610 Group Name: State ID Number:

(312) 396-6000 ext. [Phone] FEIN Number: 36-0770740

Filing Fees

Fee Required? Yes

SERFF Tracking Number: BNLB-125777935 State: Arkansas

Filing Company: Bankers Life and Casualty Company State Tracking Number: 39946

Company Tracking Number:

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: GR-A06

Project Name/Number:

Fee Amount: \$50.00

Retaliatory? No

Fee Explanation: \$50.00 per rate filing x 1 filing = \$50.00

Per Company: No

SERFF Tracking Number: BNLB-125777935 State: Arkansas

Filing Company: Bankers Life and Casualty Company State Tracking Number: 39946

Company Tracking Number:

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: GR-A06

Project Name/Number:

COMPANY AMOUNT DATE PROCESSED TRANSACTION #
Bankers Life and Casualty Company \$50.00 08/15/2008 21967111

Bankers Life and Casualty Company \$500.00 09/10/2008 22407253

 SERFF Tracking Number:
 BNLB-125777935
 State:
 Arkansas

 Filing Company:
 Bankers Life and Casualty Company
 State Tracking Number:
 39946

Company Tracking Number:

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: GR-A06

Project Name/Number:

Correspondence Summary

Dispositions

Status Created By Created On Date Submitted

Approved Stephanie Fowler 09/11/2008 09/11/2008

Objection Letters and Response Letters

Objection Letters Response Letters Status Created By Responded By Date Submitted Created On Date Submitted **Created On** Pending Stephanie 09/10/2008 09/10/2008 Diana Willis 09/10/2008 09/10/2008 Fowler Industry Response

 SERFF Tracking Number:
 BNLB-125777935
 State:
 Arkansas

 Filing Company:
 Bankers Life and Casualty Company
 State Tracking Number:
 39946

Company Tracking Number:

TOI: MS051 Individual Medicare Supplement - Standard Plans Sub-TOI: MS051.001 Plan A

Product Name: GR-A06

Project Name/Number: /

Disposition

Disposition Date: 09/11/2008

Implementation Date: 01/01/2009

Status: Approved

Comment: We have approved the requested rate increases for Plans A, B, C, E, F, G, J, K, and L to be implemented on or after January 1, 2009. This approval

is subject to the following:

Increases will not be given more frequently than once in a twelve-month period.

Company Name:	Overall % Rate	Written Premium	# of Policy	Premium:	Maximum %	Minimum %	Overall %
	Impact:	Change for this	Holders		Change (where	Change (where	Indicated
		Program:	Affected for		required):	required):	Change:
			this				
			Program:				
Bankers Life and	11.800%	\$472,940	2,201	\$	15.000%	0.000%	11.800%
Casualty Company							

SERFF Tracking Number: BNLB-125777935 State: Arkansas
Filing Company: Bankers Life and Casualty Company State Tracking Number: 39946

Company Tracking Number:

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: GR-A06

Project Name/Number:

Item Type	Item Name	Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Approved	No
Rate	Plan A Rate Sheet	Approved	Yes
Rate	Plan B Rate Sheet	Approved	Yes
Rate	Plan C Rate Sheet	Approved	Yes
Rate	Plan D Rate Sheet	Approved	Yes
Rate	Plan E Rate Sheet	Approved	Yes
Rate	Plan F Rate Sheet	Approved	Yes
Rate	Plan FH Rate Sheet	Approved	Yes
Rate	Plan G Rate Sheet	Approved	Yes
Rate	Plan J Rate Sheet	Approved	Yes
Rate	Plan K Rate Sheet	Approved	Yes
Rate	Plan L Rate Sheet	Approved	Yes

SERFF Tracking Number: BNLB-125777935 State: Arkansas
Filing Company: Bankers Life and Casualty Company State Tracking Number: 39946

Company Tracking Number:

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: GR-A06

Project Name/Number: /

Objection Letter

Objection Letter Status Pending Industry Response

Objection Letter Date 09/10/2008
Submitted Date 09/10/2008
Respond By Date 10/10/2008

Dear Diana Willis,

This will acknowledge receipt of the captioned filing.

Arkansas filing fees as set out in AR Rule 57, Sec. 5, Subsection II requires \$50.00 for each rate filing (\$50 x 11 Plans = \$550). Please forward a check for \$500.00, or the retaliatory fee if greater, to cover the balance of the fees for this filing. If not EFT, please include our AID number in your transmittal letter.

Please feel free to contact me if you have questions.

Sincerely,

Stephanie Fowler

Response Letter

Response Letter Status Submitted to State

Response Letter Date 09/10/2008 Submitted Date 09/10/2008

Dear Stephanie Fowler,

Comments:

Response 1

Comments: Thank you for your letter of September 10, 2008.

I have submitted the additional \$500.00 required. I am truly sorry for the inconvenience this may have caused.

Changed Items:

No Supporting Documents changed.

SERFF Tracking Number: BNLB-125777935 State: Arkansas

Filing Company: Bankers Life and Casualty Company State Tracking Number: 39946

Company Tracking Number:

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: GR-A06

Project Name/Number:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Sincerely, Diana Willis SERFF Tracking Number: BNLB-125777935 State: Arkansas

Filing Company: Bankers Life and Casualty Company State Tracking Number: 39946

Company Tracking Number:

TOI: MS051 Individual Medicare Supplement - Standard Plans Sub-TOI: MS051.001 Plan A

Product Name: GR-A06

Project Name/Number: /

Rate Information

Rate data applies to filing.

Filing Method: SERFF

Rate Change Type: Increase

Overall Percentage of Last Rate Revision: 12.130%

Effective Date of Last Rate Revision: 01/01/2008

Filing Method of Last Filing: SERFF

Company Rate Information

Company Name:	Overall %	Overall % Rate	Written	# of Policy	Premium:	Maximum %	Minimum %
	Indicated	Impact:	Premium	Holders		Change (where	Change (where
	Change:		Change for	Affected for this		required):	required):
			this	Program:			
			Program:				
Bankers Life and	11.800%	11.800%	\$472,940	2,201		15.000%	0.000%

Casualty Company

 SERFF Tracking Number:
 BNLB-125777935
 State:
 Arkansas

 Filing Company:
 Bankers Life and Casualty Company
 State Tracking Number:
 39946

Company Tracking Number:

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: GR-A06

Project Name/Number:

Rate/Rule Schedule

Review Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:*	Rate ActionInformation:		Attachments
Approved	Plan A Rate Sheet	GR-A06A	Revised	Previous State Filing Number: Percent Rate Change Request:	36611 15	Rate Sheet - Plan A.pdf AR - Modal Premiums - Plan A.pdf
Approved	Plan B Rate Sheet	GR-A06B	Revised	Previous State Filing Number: Percent Rate Change Request:	36611 10	Rate Sheet - Plan B.pdf AR - Modal Premiums - Plan B.pdf
Approved	Plan C Rate Sheet	GR-A06C	Revised	Previous State Filing Number: Percent Rate Change Request:	36611 15	Rate Sheet - Plan C.pdf AR - Modal Premiums - Plan C.pdf
Approved	Plan D Rate Sheet	GR-A06D	Revised	Previous State Filing Number:	36611	Rate Sheet - Plan D.pdf AR - Modal Premiums - Plan D.pdf
Approved	Plan E Rate Sheet	GR-A06E	Revised	Previous State Filing Number:	36611	Rate Sheet - Plan E.pdf AR - Modal

 SERFF Tracking Number:
 BNLB-125777935
 State:
 Arkansas

 Filing Company:
 Bankers Life and Casualty Company
 State Tracking Number:
 39946

Company Tracking Number:

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: GR-A06

Project Name/Number: /

Percent Rate Change 12 Premiums - Plan E.pdf

SERFF Tracking Number: BNLB-125777935 State: Arkansas
Filing Company: Bankers Life and Casualty Company State Tracking Number: 39946

Company Tracking Number:

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: GR-A06

Project Name/Number:

Approved	Plan F Rate Sheet	GR-A06F	Revised	Previous State Filing Number: Percent Rate Change Request:	36611 15	Rate Sheet - Plan F.pdf AR - Modal Premiums - Plan F.pdf
Approved	Plan FH Rate Sheet	GR-A06FH	Revised	Previous State Filing Number:	36611	Rate Sheet - Plan FH.pdf AR - Modal Premiums - Plan FH.pdf
Approved	Plan G Rate Sheet	GR-A06G	Revised	Previous State Filing Number: Percent Rate Change Request:	36611	Rate Sheet - Plan G.pdf AR - Modal Premiums - Plan G.pdf
Approved	Plan J Rate Sheet	GR-A06J	Revised	Previous State Filing Number: Percent Rate Change Request:	36611	Rate Sheet - Plan J.pdf AR - Modal Premiums - Plan J.pdf
Approved	Plan K Rate Sheet	GR-A06K	Revised	Previous State Filing Number: Percent Rate Change Request:	36611 6	Rate Sheet - Plan K.pdf AR - Modal Premiums - Plan K.pdf
Approved	Plan L Rate Sheet	GR-A06L	Revised	Previous State Filing Number:	36611	Rate Sheet - Plan L.pdf AR - Modal Premiums - Plan

SERFF Tracking Number: BNLB-125777935 State: Arkansas

Filing Company: Bankers Life and Casualty Company State Tracking Number: 39946

Company Tracking Number:

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: GR-A06

Project Name/Number: /

Percent Rate Change 6

Request:

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u> <u>Plan A</u> Ages 65 & Over \$2,266.78

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Renewal Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

0.08583 for Monthly Bank Draft/Payroll Deduction; 0.515 for Semi-Annual; 0.2625 for Quarterly; 0.09167 for Renewal Direct Bill; 2.50 for Triennial

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Premium Rates* Male or Female

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06A	65 & Older	2266.78	1168.36	596.11	208.79	195.56	5667.06

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u> <u>Plan B</u> Ages 65 & Over \$3,285.03

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Renewal Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

0.08583 for Monthly Bank Draft/Payroll Deduction; 0.515 for Semi-Annual; 0.2625 for Quarterly; 0.09167 for Renewal Direct Bill; 2.50 for Triennial

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Premium Rates* Male or Female

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06B	65 & Older	3285.03	1692.75	863.44	302.13	282.96	8212.72

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u> <u>Plan C</u> Ages 65 & Over \$4,712.91

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Renewal Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

0.08583 for Monthly Bank Draft/Payroll Deduction; 0.515 for Semi-Annual; 0.2625 for Quarterly; 0.09167 for Renewal Direct Bill; 2.50 for Triennial

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Premium Rates* Male or Female

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06C	65 & Older	4712.91	2428.09	1238.31	433.02	405.51	11782.48

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u> <u>Plan D</u> Ages 65 & Over \$2,756.27

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Renewal Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

0.08583 for Monthly Bank Draft/Payroll Deduction; 0.515 for Semi-Annual; 0.2625 for Quarterly; 0.09167 for Renewal Direct Bill; 2.50 for Triennial

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Premium Rates* Male or Female

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06D	65 & Older	2756.27	1420.44	724.62	253.66	237.57	6890.80

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u> <u>Plan E</u> Ages 65 & Over \$3,366.08

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Renewal Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

0.08583 for Monthly Bank Draft/Payroll Deduction; 0.515 for Semi-Annual; 0.2625 for Quarterly; 0.09167 for Renewal Direct Bill; 2.50 for Triennial

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Premium Rates* Male or Female

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06E	65 & Older	3366.08	1734.49	884.72	309.56	289.91	8415.36

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u> <u>Plan F</u> Ages 65 & Over \$2,780.60

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Renewal Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

0.08583 for Monthly Bank Draft/Payroll Deduction; 0.515 for Semi-Annual; 0.2625 for Quarterly; 0.09167 for Renewal Direct Bill; 2.50 for Triennial

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Premium Rates* Male or Female

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06F	65 & Older	2780.60	1432.97	731.00	255.89	239.66	6951.61

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u> <u>Plan FH</u> Ages 65 & Over \$390.11

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Renewal Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

0.08583 for Monthly Bank Draft/Payroll Deduction; 0.515 for Semi-Annual; 0.2625 for Quarterly; 0.09167 for Renewal Direct Bill; 2.50 for Triennial

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Premium Rates* Male or Female

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06FH	65 & Older	390.11	201.90	103.42	36.76	34.48	975.28

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u> <u>Plan G</u> Ages 65 & Over \$2,151.04

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Renewal Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

0.08583 for Monthly Bank Draft/Payroll Deduction; 0.515 for Semi-Annual; 0.2625 for Quarterly; 0.09167 for Renewal Direct Bill; 2.50 for Triennial

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Premium Rates* Male or Female

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06G	65 & Older	2151.04	1108.76	565.72	198.18	185.63	5377.69

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u> <u>Plan J</u> Ages 65 & Over \$2,042.93

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Renewal Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

0.08583 for Monthly Bank Draft/Payroll Deduction; 0.515 for Semi-Annual; 0.2625 for Quarterly; 0.09167 for Renewal Direct Bill; 2.50 for Triennial

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Premium Rates* Male or Female

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06J	65 & Older	2042.93	1053.08	537.34	188.27	176.35	5107.41

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u> <u>Plan K</u> Ages 65 & Over \$961.08

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Renewal Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

0.08583 for Monthly Bank Draft/Payroll Deduction; 0.515 for Semi-Annual; 0.2625 for Quarterly; 0.09167 for Renewal Direct Bill; 2.50 for Triennial

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Premium Rates* Male or Female

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06K	65 & Older	961.08	495.95	253.32	89.10	83.49	2402.75

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u> <u>Plan L</u> Ages 65 & Over \$1,379.12

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Renewal Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

0.08583 for Monthly Bank Draft/Payroll Deduction; 0.515 for Semi-Annual; 0.2625 for Quarterly; 0.09167 for Renewal Direct Bill; 2.50 for Triennial

Chicago, Illinois

Standardized Medicare Supplement Policy Form Series GR-A06

Premium Rates* Male or Female

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06L	65 & Older	1379.12	711.23	363.07	127.42	119.37	3447.85